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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <input checked="" type="checkbox"/> Allowance <input checked="" type="checkbox"/> TM Acknowledged <input checked="" type="checkbox"/> Examiner's Signature Initials		STATE OR  COUNTRY JAPAN	SHEETS  DRAWING 6 /	TOTAL  CLAIMS 1815 /	INDEPENDENT  CLAIMS 3 /
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<b>TITLE</b> INFORMATION PROCESSING DEVICE AND INFORMATION PROCESSING METHOD USING FINGERPRINT IDENTIFICATION					
FILING FEE  RECEIVED 760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )		